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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. END 897 DIV1/GSG
First Inventor: Seth Foerster et al. Title: Methods and Devices for Defining and Marking Tissue		
I hereby certify that this correspondence is being deposited today with the United States Postal Service as Express Mail – Post Office to Addressee in an envelope addressed to: Commissioner for Patents, MS:Patent Application, PO Box 1450, Alexandria, VA 22313. Name: <i>Linda F. Hansen</i> Date: July 30, 2003 Linda F. Hansen		
(only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No. EU 472 450 742 US
APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents MS Patent Application PO Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. 3. <input checked="" type="checkbox"/> Specification Total Pages: <i>(Preferred arrangement set forth below)</i> <input checked="" type="checkbox"/> X Descriptive Title of the Invention <input checked="" type="checkbox"/> X Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix <input checked="" type="checkbox"/> X Background of the Invention <input checked="" type="checkbox"/> X Brief Summary of the Invention <input checked="" type="checkbox"/> X Brief Description of the Drawings <i>(if filed)</i> <input checked="" type="checkbox"/> X Detailed Description <input checked="" type="checkbox"/> X Claim(s) <input checked="" type="checkbox"/> X Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s)/35 USC 113) Total Sheets 7 5. Oath or Declaration [Total Pages] 1 a. <input type="checkbox"/> UNEXECUTED b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 18. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: 10/213,638 filed on August 7, 2002; which is a divisional of 09/954,646 filed on September 18, 2001; which is a continuation of 09/776,125, filed February 2, 2001; which is a continuation of 08/858,389 filed May 19, 1997; which is a continuation of 08/308,097 filed September 16, 1994. Prior application information: Examiner: B. Koo Group Art Unit: 3764 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Application Cover Sheet w/Express Mail Certification
19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA 20. TELEPHONE CONTACT Gerry S. Gressel. Please direct all telephone calls or facsimiles to: Telephone: (513) 337-3535 Fax: (513) 337-8489		
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Gerry S. Gressel	Reg. No. 34,342
SIGNATURE	<i>Gerry S. Gressel</i>	
		Date: July 30, 2003

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FEE TRANSMITTAL

Complete if Known	
Application Number	
Filing Date	July 30, 2003
First Named Inventor	Seth Foerster et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	END 897DIV1/GSG

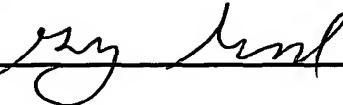
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE
TOTAL CLAIMS	6	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	2	0	x 84.00	\$ 0/00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$750.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/END 897DIV1/GSG in the amount of \$750.00.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/END 897 DIV1/GSG.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Gerry S. Gressel	Reg. No. 34,342
Signature		Date: July 30, 2003 Deposit Account No. 10-0750